

**INTERDEPARTMENTAL
MESSAGE**

STATE OF CONNECTICUT

To	NAME, TITLE	DATE
	Central Permit Processing Unit, 1 st Floor	[Insert Date]
From	AGENCY, ADDRESS	
	DEEP, Bureau of Water Management, 79 Elm Street, Hartford, CT. 06106	
	NAME, TITLE	TELEPHONE
	[Insert Name of District Engineer]	(xxx) xxx-xxxx
	AGENCY, ADDRESS	
	Department of Transportation, [Insert District Headquarters Address]	

Subject **State Project No. xxxx-xxxx**
Registration for the Discharge of Stormwater and Dewatering Wastewaters from
Construction Activities
[Insert Project Description]
[Insert Town]

Attached is an original and one electronic copy (CD) of the General Permit
Registration Form for the Discharge of Stormwater and Dewatering Wastewaters from
Construction Activities for the above referenced project.

If you have any questions concerning this subject, please contact [Insert Name of
District Environmental Coordinator] at (xxx) xxx-xxxx.

Attachments

[Insert Name of Environmental Coordinator]
bcc: